

CLERK US DISTRICT COURT
NORTHERN DISTRICT OF TEXAS
FILED

UNITED STATES DISTRICT COURT
FOR THE NORTHERN DISTRICT OF TEXAS

2019 AUG 16 PM 12:19

DIVISION

Amendment of Existing Case
3-19cv-1743 N → A terrorist attack on kids

DEPUTY CLERK

Plaintiff TRAYEE RAUT & KUSHAL RAUT & MANOGNA DEVABHAKTUN
KIDS ARE BEING HARASSED BY CPS. Ex-husband
is cheating me. I do need to get my kids back
v. ASAP 3-19cv-1743 N

Defendant GOVERNMENT OF NEW YORK, UBER, FRISCO POLICE DEPARTMENT, DENTON COUNTY,
NEW YORK LIFE, SELECT MEDICAL HOSPITALS, NORTH PLATTE LAND HILLS HEALTHMARKETS, SELECT MEDICAL HOSPITALS

It's a terrorist attack on a family who is nothing but Trayee Raut, Kushal Raut and Manogna devabhatun.

It started in Nov 2017 by a man who called Harsh Powell, Niramala Reela, Alex Kiyabu, Cindy Hernandez and other people around because of me following the religion as per religion of freedom and also race being Indian.

*Attach additional pages as needed

Date 08/16/2019

Signature D. Devabhatun

Print Name DEVABHAKTUN MANOGNA

Address 2305 LEBANON RD, #2107, FRISCO, TX 75034

City, State, Zip FRISCO, TEXAS 75034

Telephone 469-978-4941

There is a several harassment done
on me in New York life by law enforcement
in last one year which is very illegal
and harassing. The same thing happened in
concentration and healthy markets too caused by
cheers, uber, grocery stores for one being some
legion and speculate. Based on how the
situation is pronounced tall hill school and
Robert Kevra have and CPS started killing
me and separating my wife and harassing
me. lot of illegal things happened on
me for the last 7 days when it based to law enforcement
in New York life started harassing me too.
I am in need of seeing US government
to not handling the situation as they situation
started on 01/06/2019 soon after I got citizenship
on 12/10/2018 law enforcement from New York life are
David Johnson and William Pearce I need
to see yahoo, android, you tube, google and
Kleger too. I need to see hospital & almost
10 of them along with the other ones Newark Hospital,
Kaithe Gingery ally, Ray, gingery hall, Southern Morella
Crime investigation Center, Domestic Violence Center

*Additional Page(s)

Hospital in Dallas are feeding drugs to patients illegally and forcibly with out following patient rights and patient concerns.

Helps are dressing up illegally.

I need to see movie theater for playing illegal movies like twilight series
I need to see on New York life for not screening their company as Reg Federal government Soles and forces land country create for not helping her democratic land.

THE UNITED STATES OF AMERICA

No. 40728091

CERTIFICATE OF NATURALIZATION

Personal description of holder
as of date of naturalization:

Date of birth: JULY 06, 1979

Sex: FEMALE

Height: 5 feet 5 inches

Marital status: DIVORCED

Country of former nationality:

at: IRVING, TEXAS
INDIA

The Secretary having found that:

MANOGNA DEVABHAKTUNI

residing at: FRISCO, TEXAS

having complied in all respects with all of the applicable provisions of the naturalization laws of the United States, being entitled to be admitted as a citizen of the United States, and having taken the oath of allegiance at a ceremony conducted by

U.S. CITIZENSHIP AND IMMIGRATION SERVICES
at: IRVING, TEXAS
on: DECEMBER 10, 2018

such person is admitted as a citizen of the United States of America.

I certify that the description given is true, and that the photograph affixed hereto is a likeness of me.

MANOGNA DEVABHAKTUNI
(Complete and true signature of holder)

Be it known that, pursuant to an application filed with the Secretary of Homeland Security

CERTIFICATION OF VITAL RECORD

STATE OF TEXAS

CERTIFICATE OF BIRTH

BIRTH NUMBER

1. Child's Name TRAYEE	First RAVI	Middle	Last	Suffix	12. Date of Birth (mm/dd/yyyy) 03/18/2011	3. Sex FEMALE	
4a. Place of Birth - County COLLIN	4b. City or Town (If outside city limits, give precinct no.) PLANO	5. Time of Birth 10:12 AM		6a. Plurality - Single, Twin, Triple, etc. SINGLE	6b. If Plural Birth, Born 1st, 2nd, 3rd, etc.		
7a. Place of birth <input type="checkbox"/> Clinic / Doctor's Office <input type="checkbox"/> Licensed Birthing Center <input checked="" type="checkbox"/> Hospital <input type="checkbox"/> Home Birth (Planned to deliver at home?) <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Other (Specify) ALVIN GEBERT 1600 COIT ROAD STE.210 PLANO, TEXAS 75075		7b. Name of Hospital or Birthing Center, NPI. (If Not Institution, Give Street Address) PRESBYTERIAN HOSPITAL OF PLANO					
8a. Attendant's Name, NPI, and Mailing Address		9a. Certifier - I certify that this child was born alive at the place and time and on the date as stated. DIANA NAVARRO Signature and Title 03/20/2011 Date Signed					
8b. <input checked="" type="checkbox"/> MD <input type="checkbox"/> DO <input type="checkbox"/> CNM <input type="checkbox"/> Midwife <input type="checkbox"/> Other (Specify): MANOGNA		10. Mother's Name Prior to First Marriage DEVABHAKTUNI	First	Middle	Last	11. Date of Birth (mm/dd/yyyy) 07/05/1979	12. Birthplace (State, Territory or Foreign Country) INDIA
13a. Residence - State TEXAS	13b. County DENTON	13c. City, Town or Location FRISCO	13d. Street Address or Rural Location 12409 PLEASANT HILL LANE				
13e. Zip Code 75034	13f. Inside City Limits <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	14. Mailing Address:	<input checked="" type="checkbox"/> Same As Residence, or				
15. Father's Name MOHAN	First KUMAR	Middle RAVI	Last	Suffix	16. Date of Birth (mm/dd/yyyy) 08/23/1977	17. Birthplace (State, Territory or Foreign Country) INDIA	
18a. Local File Number 07-2392	18b. Date Received by Local Registrar 03/22/2011	18c. Signature of Local Registrar 					

VS-111.3 REV. 01/05 - WARNING: THE PENALTY FOR KNOWINGLY MAKING A FALSE STATEMENT IN THIS FORM CAN BE 2-10 YEARS IN PRISON AND A FINE OF UP TO \$5,000.

075955

State Of Texas
County of Collin

I hereby certify that the foregoing is a true and correct copy of the original record as filed in this office.

Issued

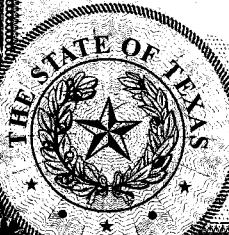
By:

Stacy Kemp
Stacy Kemp, County Clerk

Deputy

Collin County, Texas

365749



CERTIFICATION OF VITAL RECORD

STATE OF TEXAS

CERTIFICATE OF BIRTH

BIRTH NUMBER

1. Child's Name KUSHAL RAVI	First	Middle	Last	Suffix	2. Date of Birth (mm/dd/yyyy) 11/21/2013	3. Sex MALE	
4a. Place of Birth - County COLLIN	4b. City or Town (If outside city limits, give precinct no.) PLANO	5. Time of Birth 102:11 AM	6a. Plurality - Single, Twin, Triple, etc. SINGLE	6b. If Plural Birth, Born 1st, 2nd, 3rd, etc.			
7a. Place of birth <input type="checkbox"/> Clinic / Doctor's Office <input type="checkbox"/> Licensed Birthing Center <input checked="" type="checkbox"/> Hospital <input type="checkbox"/> Home Birth (Planned to deliver at home? <input type="checkbox"/> Yes <input type="checkbox"/> No) <input type="checkbox"/> Other (Specify)			7b. Name of Hospital or Birthing Center, NPI - (If Not Institution, Give Street Address) PRESBYTERIAN HOSPITAL OF PLANO				
8a. Attendant's Name, NPI, and Mailing Address ALVIN GEBERT 1600 COIT ROAD STE.210 PLANO, TEXAS 75075			9a. Certifier - I certify that this child was born alive at the place and time and on the date as stated. LORETHER DENNIS Signature and Title 11/23/2013 Date Signed				
8b. <input checked="" type="checkbox"/> MD. <input type="checkbox"/> DO <input type="checkbox"/> CNM <input type="checkbox"/> Midwife <input type="checkbox"/> Other (Specify)			9b. <input type="checkbox"/> Attendant <input type="checkbox"/> Facility Administrator/Designee <input checked="" type="checkbox"/> Other (Specify) BIRTH REGISTRY				
10. Mother's Name Prior to First Marriage MANOGNA DEVABHAKTUNI			First	Middle	Last	11. Date of Birth (mm/dd/yyyy) 07/06/1979	12. Birthplace (State, Territory or Foreign Country) INDIA
13a. Residence - State TEXAS	13b. County DENTON	13c. City, Town or Location FRISCO	13d. Street Address or Rural Location 112409 PLEASANT HILL LANE				
13e. Zip Code 75033	13f. Inside City Limits <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	14. Mailing Address:	15. Father's Name MOHAN KUMAR RAVI				
16a. Local File Number 0712431			16b. Date Received by Local Registrar 11/27/2013	16c. Signature of Local Registrar Stacey Kemp			
VS 111.3 REV. 01/05. WARNING: THE PENALTY FOR KNOWINGLY MAKING A FALSE STATEMENT IN THIS FORM CAN BE 2-10 YEARS IN PRISON AND A FINE OF UP TO \$5,000.							350230

**State Of Texas
County of Collin**

I hereby certify that the foregoing is a true and correct copy of the original record as filed in this office.

Issued:

April 11, 2016

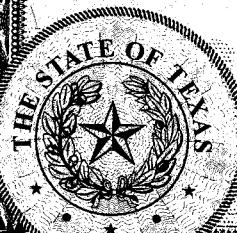
Stacey Kemp, County Clerk

By:

Deputy

Collin County, Texas

365748



I. (a) PLAINTIFFS

*Terrorist Attack on
Terrorist Attack on
Terrorist Attack on
Terrorist Attack on
Terrorist Attack on*

*Tragedy Ravi, keeping our
for terrorizing freedom of reli-*

(b) County of Residence of First Listed Plaintiff *earm.*
(EXCEPT IN U.S. PLAINTIFF CASES)

DEFENDANTS

U.S. Government
helping one need their safety,
Homeless Society, U.S. Government
County of Residence of First Listed Defendant
(IN U.S. PLAINTIFF CASES ONLY)

NOTE: IN LAND CONDEMNATION CASES, USE THE LOCATION OF
THE TRACT OF LAND INVOLVED.

Attorneys (If Known)

II. BASIS OF JURISDICTION (Place an "X" in One Box Only)

- | | |
|---|---|
| <input type="checkbox"/> 1 U.S. Government Plaintiff | <input checked="" type="checkbox"/> 3 Federal Question
<i>(U.S. Government Not a Party)</i> |
| <input checked="" type="checkbox"/> 2 U.S. Government Defendant | <input checked="" type="checkbox"/> 4 Diversity
<i>(Indicate Citizenship of Parties in Item III)</i> |

III. CITIZENSHIP OF PRINCIPAL PARTIES (Place an "X" in One Box for Plaintiff and One Box for Defendant)
(For Diversity Cases Only)

- | PTF | DEF | PTF | DEF |
|---|---|---------------------------------------|---------------------------------------|
| <input checked="" type="checkbox"/> 1 Citizen of This State | <input type="checkbox"/> 1 Incorporated or Principal Place of Business In This State | <input checked="" type="checkbox"/> 4 | <input type="checkbox"/> 4 |
| <input type="checkbox"/> 2 Citizen of Another State | <input checked="" type="checkbox"/> 2 Incorporated and Principal Place of Business In Another State | <input type="checkbox"/> 5 | <input type="checkbox"/> 5 |
| <input checked="" type="checkbox"/> 3 Citizen or Subject of a Foreign Country | <input type="checkbox"/> 3 Foreign Nation | <input type="checkbox"/> 6 | <input checked="" type="checkbox"/> 6 |

IV. NATURE OF SUIT (Place an "X" in One Box Only)

CONTRACT	TORTS	FORFEITURE/PENALTY	BANKRUPTCY	OTHER STATUTES
<input checked="" type="checkbox"/> 110 Insurance <input type="checkbox"/> 120 Marine <input type="checkbox"/> 130 Miller Act <input type="checkbox"/> 140 Negotiable Instrument <input type="checkbox"/> 150 Recovery of Overpayment & Enforcement of Judgment <input checked="" type="checkbox"/> 151 Medicare Act <input checked="" type="checkbox"/> 152 Recovery of Defaulted Student Loans (Excludes Veterans) <input type="checkbox"/> 153 Recovery of Overpayment of Veteran's Benefits <input type="checkbox"/> 160 Stockholders' Suits <input type="checkbox"/> 190 Other Contract <input type="checkbox"/> 195 Contract Product Liability <input type="checkbox"/> 196 Franchise	PERSONAL INJURY <input checked="" type="checkbox"/> 310 Airplane <input checked="" type="checkbox"/> 315 Airplane Product Liability <input checked="" type="checkbox"/> 320 Assault, Libel & Slander <input checked="" type="checkbox"/> 330 Federal Employers' Liability <input checked="" type="checkbox"/> 340 Marine <input type="checkbox"/> 345 Marine Product Liability <input type="checkbox"/> 350 Motor Vehicle <input type="checkbox"/> 355 Motor Vehicle Product Liability <input checked="" type="checkbox"/> 360 Other Personal Injury <input checked="" type="checkbox"/> 362 Personal Injury - Medical Malpractice	PERSONAL INJURY <input checked="" type="checkbox"/> 365 Personal Injury - Product Liability <input checked="" type="checkbox"/> 367 Health Care/ Pharmaceutical Personal Injury Product Liability <input checked="" type="checkbox"/> 368 Asbestos Personal Injury Product Liability	<input checked="" type="checkbox"/> 625 Drug Related Seizure of Property 21 USC 881 <input type="checkbox"/> 690 Other	<input checked="" type="checkbox"/> 422 Appeal 28 USC 158 <input type="checkbox"/> 423 Withdrawal 28 USC 157 PROPERTY RIGHTS <input type="checkbox"/> 820 Copyrights <input type="checkbox"/> 830 Patent <input type="checkbox"/> 835 Patent - Abbreviated New Drug Application <input type="checkbox"/> 840 Trademark
<input type="checkbox"/> 210 Land Condemnation <input type="checkbox"/> 220 Foreclosure <input checked="" type="checkbox"/> 230 Rent Lease & Ejectment <input type="checkbox"/> 240 Torts to Land <input type="checkbox"/> 245 Tort Product Liability <input type="checkbox"/> 290 All Other Real Property	REAL PROPERTY <input type="checkbox"/> 440 Other Civil Rights <input type="checkbox"/> 441 Voting <input checked="" type="checkbox"/> 442 Employment <input checked="" type="checkbox"/> 443 Housing/ Accommodations <input type="checkbox"/> 445 Amer. w/Disabilities - Employment <input type="checkbox"/> 446 Amer. w/Disabilities - Other <input type="checkbox"/> 448 Education	CIVIL RIGHTS Habeas Corpus: <input type="checkbox"/> 463 Alien Detainee <input type="checkbox"/> 510 Motions to Vacate Sentence <input checked="" type="checkbox"/> 530 General <input checked="" type="checkbox"/> 535 Death Penalty Other: <input type="checkbox"/> 540 Mandamus & Other <input type="checkbox"/> 550 Civil Rights <input type="checkbox"/> 555 Prison Condition <input type="checkbox"/> 560 Civil Detainee - Conditions of Confinement	<input type="checkbox"/> 791 Employee Retirement Income Security Act	SOCIAL SECURITY <input checked="" type="checkbox"/> 710 Fair Labor Standards Act <input checked="" type="checkbox"/> 720 Labor/Management Relations <input type="checkbox"/> 740 Railway Labor Act <input type="checkbox"/> 751 Family and Medical Leave Act <input checked="" type="checkbox"/> 790 Other Labor Litigation
				FEDERAL TAX SUITS <input type="checkbox"/> 870 Taxes (U.S. Plaintiff or Defendant) <input type="checkbox"/> 871 IRS—Third Party 26 USC 7609
				IMMIGRATION <input checked="" type="checkbox"/> 462 Naturalization Application <input checked="" type="checkbox"/> 465 Other Immigration Actions

V. ORIGIN (Place an "X" in One Box Only)

- | | | | | | | |
|---|---|--|---|--|--|---|
| <input checked="" type="checkbox"/> 1 Original Proceeding | <input type="checkbox"/> 2 Removed from State Court | <input type="checkbox"/> 3 Remanded from Appellate Court | <input type="checkbox"/> 4 Reinstated or Reopened | <input type="checkbox"/> 5 Transferred from Another District (specify) | <input type="checkbox"/> 6 Multidistrict Litigation - Transfer | <input type="checkbox"/> 8 Multidistrict Litigation - Direct File |
|---|---|--|---|--|--|---|

Cite the U.S. Civil Statute under which you are filing (Do not cite jurisdictional statutes unless diversity):

CITIZENSHIP UNITED STATES OF AMERICA

Brief description of cause:

TERROST ATTACK ON KIDS WHO ARE 8 YEARS OLD

VI. CAUSE OF ACTION

- CHECK IF THIS IS A CLASS ACTION
UNDER RULE 23, F.R.Cv.P.
- DEMAND \$
- CHECK YES only if demanded in complaint:
JURY DEMAND: Yes No

VII. REQUESTED IN COMPLAINT:

(See instructions):

JUDGE _____ DOCKET NUMBER _____

DATE

SIGNATURE OF ATTORNEY OF RECORD

FOR OFFICE USE ONLY

RECEIPT #

AMOUNT

APPLYING IFP

JUDGE

MAG. JUDGE